2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K02840

FILED May 11, 2009 Secretary of State

Entity Name: EMPIRE BUILDERS OF COLLIER COUNTY, INC.

Current Principal Place of Business: New Principal Place of Business: 9351 CORKSCREW ROAD ESTERO, FL 33928 US **Current Mailing Address: New Mailing Address:** 9351 CORKSCREW ROAD ESTERO, FL 33928 FEI Number: 65-0019252 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MELSON, RICHARD B 9351 CORKSCREW ROAD ESTERO, FL 33928 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CFO () Delete Title: (X) Change () Addition MELSON, RICHARD B. Name: Name: MELSON, RICHARD B. 12606 WATER OAK DRIVE 9351 CORKSCREW ROAD Address: Address: City-St-Zip: ESTERO, FL 33928 City-St-Zip: ESTERO, FL 33928 Title: Title: DST DST () Delete (X) Change () Addition MELSON, AMY Name: MELSON, AMY Name: 12606 WATER OAK DR 9351 CORKSCREW ROAD Address: Address: City-St-Zip: ESTERO, FL 33928 City-St-Zip: ESTERO, FL 33928 Title: Title: () Delete () Change () Addition SLAVICH, BILL Name: Name: 9351 CORKSCREW ROAD Address: Address: City-St-Zip: ESTERO, FL 33928 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AMY MELSON DST 05/11/2009